SPE RESPONSE FOR CERTIFICATE OF CORRECTION

DATE	1-31-0	S Paper No.:
	170	<u> </u>
TO SPE	OF : ART UNIT	~
SUBJEC	Γ : Request for Certificate of C	Correction on Patent No.: 6846369
A response	is requested with respect to t	the accompanying request for a certificate of correction.
Please co	mplete this form and return	with file, within 7 days to:
		Correction Branch – South Tower – 9A22
If respons MADRAS		mployee (named below) via PUBSCofC Team in
		correcting Office and/or Applicant's errors, should the correction (COCIN)? No new matter should be introduced,
should the s	cope or meaning of the claims be	changed.
		Valerie Jackson
Fh I. V	For Your Assistance	0.45.4.4.5
inank tou	For Your Assistance	Certificates of Correction Branch Tel. No. 703-308-9390 ext. 1
		161, 110. 703-300-3330 GAL. 7
		dentified correction(s) is hereby:
	sion on the appropriate box.	dentified correction(s) is hereby:
Note your decis	sion on the appropriate box.	dentified correction(s) is hereby:
Note your decis	ion on the appropriate box.	dentified correction(s) is hereby: All changes apply.
Note your decis	Approved Approved in Part Denied	dentified correction(s) is hereby: All changes apply. Specify below which changes do not apply.
Note your decis	Approved Approved in Part Denied	dentified correction(s) is hereby: All changes apply. Specify below which changes do not apply.
Note your decis	Approved Approved in Part Denied	dentified correction(s) is hereby: All changes apply. Specify below which changes do not apply.
Note your decis	Approved Approved in Part Denied	dentified correction(s) is hereby: All changes apply. Specify below which changes do not apply.
Note your decis	Approved Approved in Part Denied	dentified correction(s) is hereby: All changes apply. Specify below which changes do not apply.
Note your decis	Approved Approved in Part Denied	dentified correction(s) is hereby: All changes apply. Specify below which changes do not apply.
Note your decis	Approved Approved in Part Denied	dentified correction(s) is hereby: All changes apply. Specify below which changes do not apply.
Note your decis	Approved Approved in Part Denied	dentified correction(s) is hereby: All changes apply. Specify below which changes do not apply.
Note your decis	Approved Approved in Part Denied	dentified correction(s) is hereby: All changes apply. Specify below which changes do not apply.